

June 2, 2014

Los Angeles County **Board of Supervisors** 

> Gloria Molina First District

TO:

Each Supervisor

Mark Ridley-Thomas Second District FROM:

Mitchell H. Katz, M.D. Mul

Director

Zev Yaroslavsky Third District

> Don Knabe Fourth District

> > Director

SUBJECT:

STATUS REPORT ON KEY INDICATORS OF

PROGRESS, HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER - PROGRESS REPORT #100

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To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

This is to provide your Board with the monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of April 2014.

Census Trending (ADC includes Psychiatric & Newborn Patients)

The Average Daily Census (ADC) for the month of March was 528 out of 676 licensed beds, an estimated 76% utilization rate (78% occupancy). The census for Medical/Surgical units was an estimated 85% utilization rate (87% occupancy) for April 2014.

# **Emergency Department (ED) Indicators**

The attachment demonstrates an increase in the average daily census (ADC) in comparison to March 2014. The ED boarding times, ED wait times, and the rate of patients who left without being seen (LWBS) were stable. There was decrease in the number of patients transferred out for this period The Dangerously Overcrowding Level Comparison for April 2014 was 2.8% compared to 0.5% in March 2014.

If you have any questions or need additional information, please contact me or Dan Castillo, LAC+USC Chief Executive Officer, at (323) 409-2800.

DC:ab

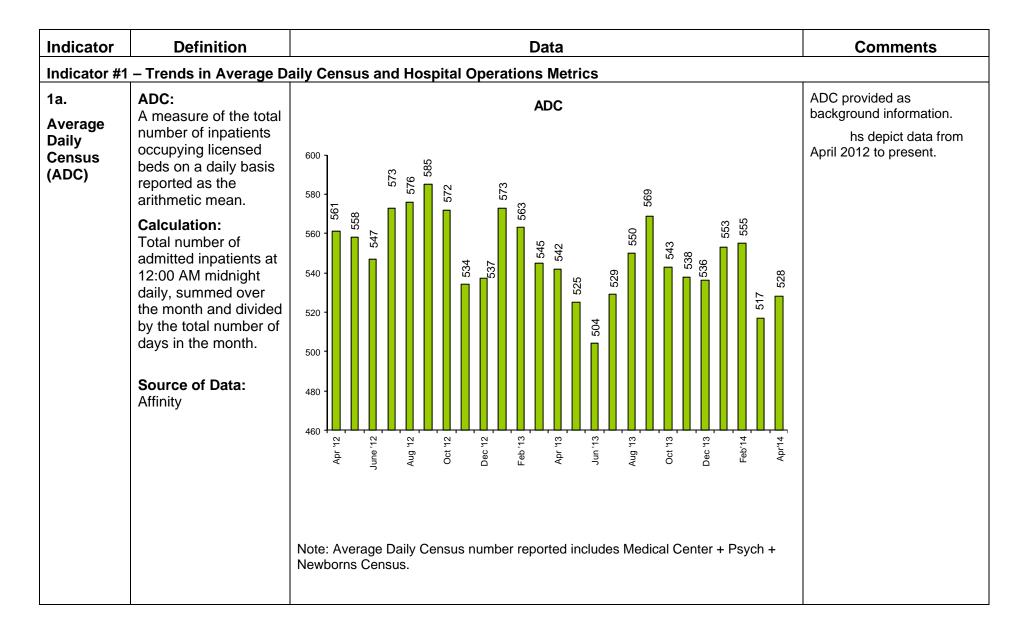
#### Attachment

Chief Executive Office C: County Counsel Executive Office, Board of Supervisors



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Operational Monitoring Report Reporting Period: April 2014



Page 1 of 17 6/4/2014

Operational Monitoring Report Reporting Period: April 2014

# Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics

# 1b.

Occupancy Rate LAC+USC Medical Center

# **Definition**:

A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.

#### Calculation:

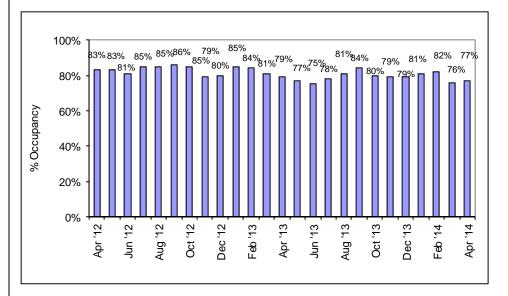
The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.

#### Source of Data:

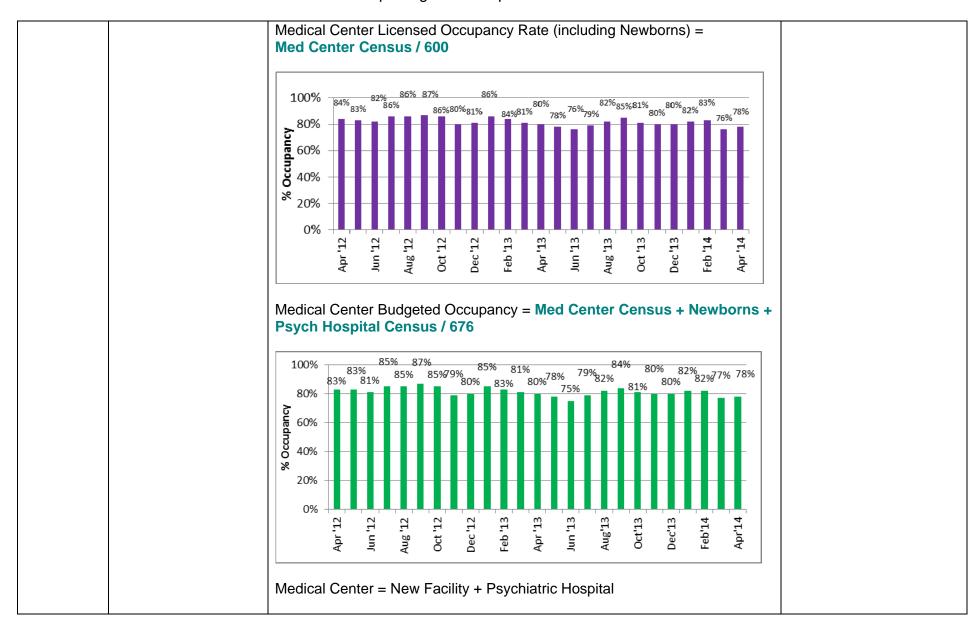
**Affinity** 

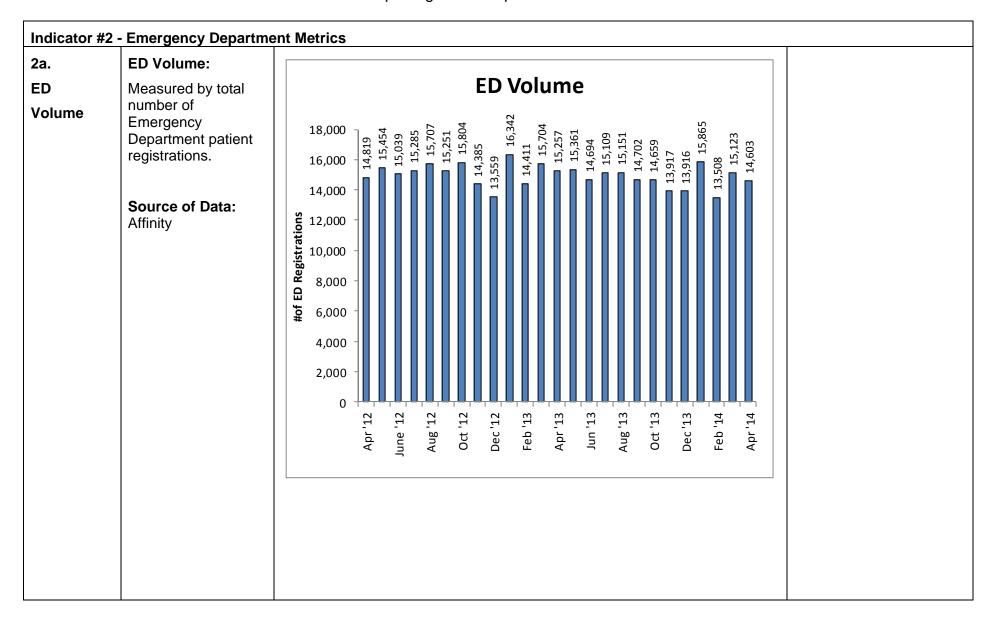
# Target: 95%

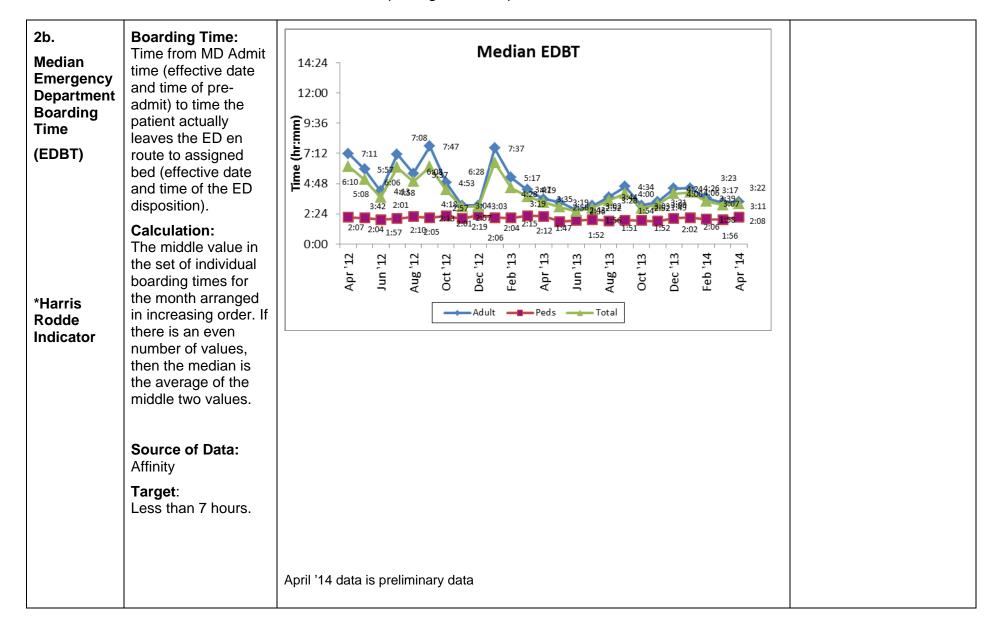
Medical Center Licensed Occupancy Rate (excluding Newborns) = **Med Center Census – Newborns / 600** 

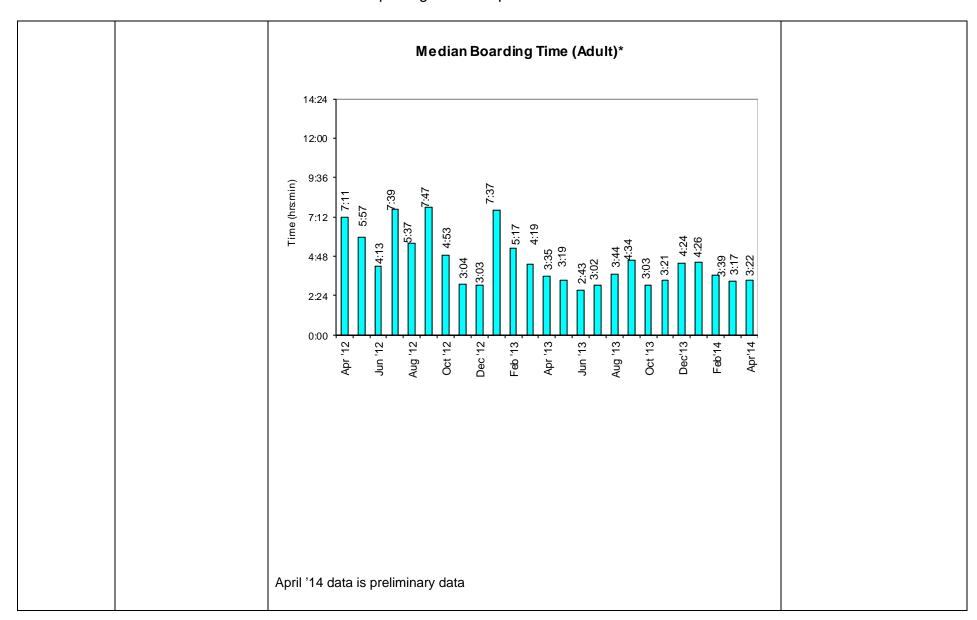


For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.









Operational Monitoring Report Reporting Period: April 2014

# **Indicator #2 - Emergency Department Metrics**

## 2c.

# ED Wait Time

#### **ED Wait Time:**

Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.

#### **Definition:**

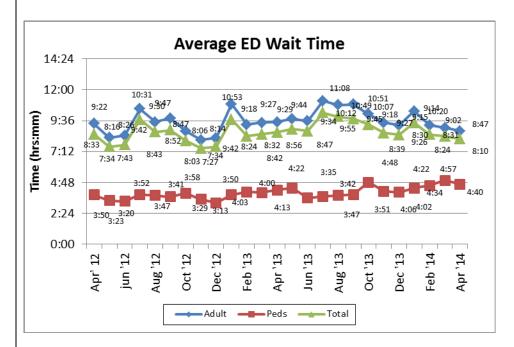
Sum of all wait time values during the monthly reporting period divided by the total number of values.

## Source of Data:

Affinity

# Target:

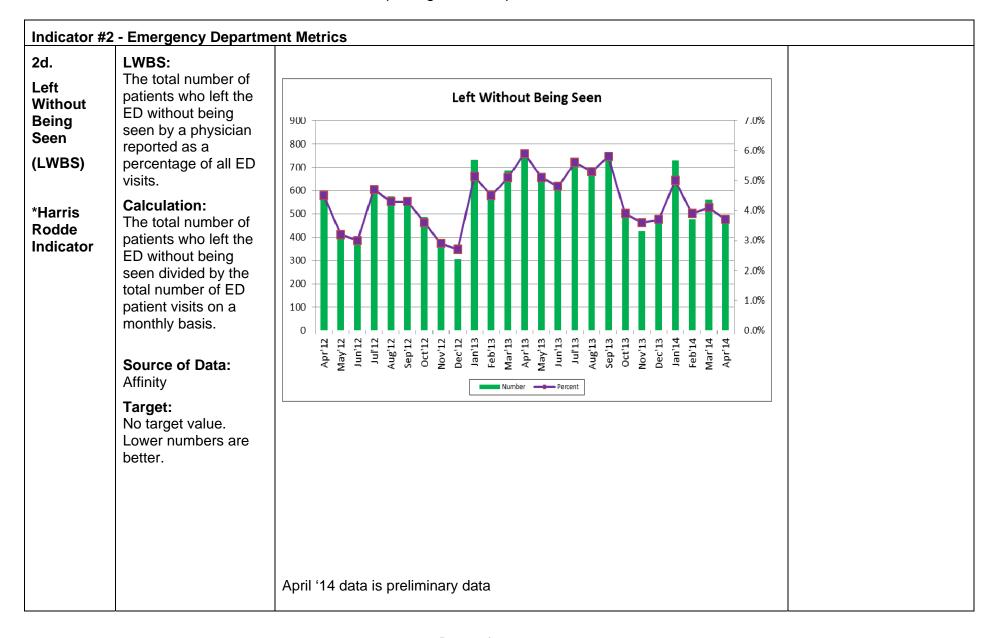
No target value. Lower numbers are better.



**Adult Wait Time:** \*Excludes Psych, Pediatric, Observation Unit, and Jail patients

**Total ED Wait time:** \*Excludes Psych, Observation Unit, and Jail patients

April '14 data is preliminary data



Operational Monitoring Report Reporting Period: April 2014

# **Indicator #2 - Emergency Department Metrics**

# 2e.

# ED Diversion

#### **ED Diversion:**

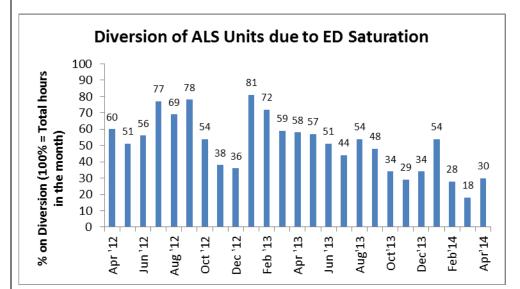
A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis.

#### Calculation:

The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month.

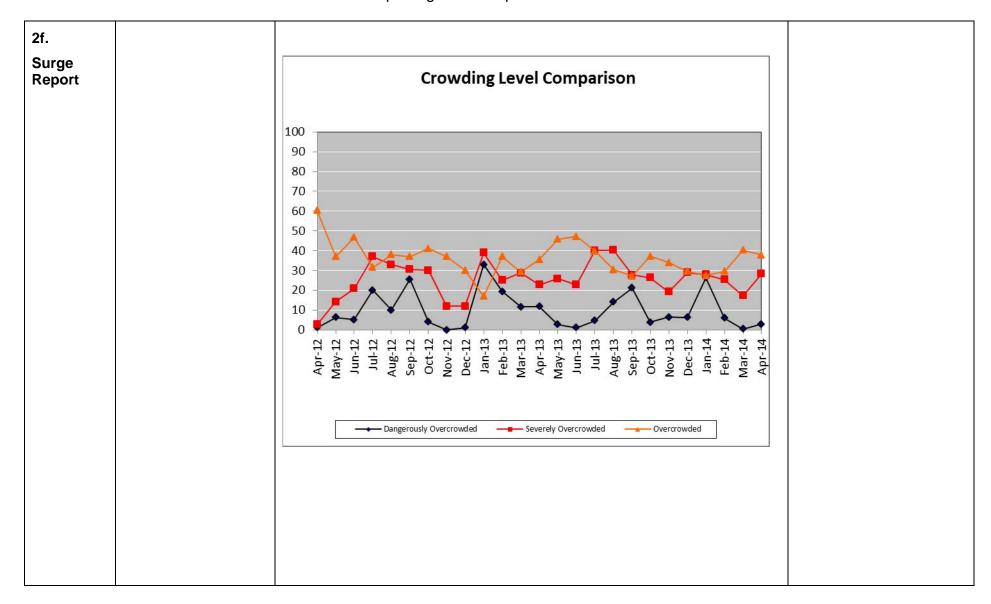
# Source of Data:

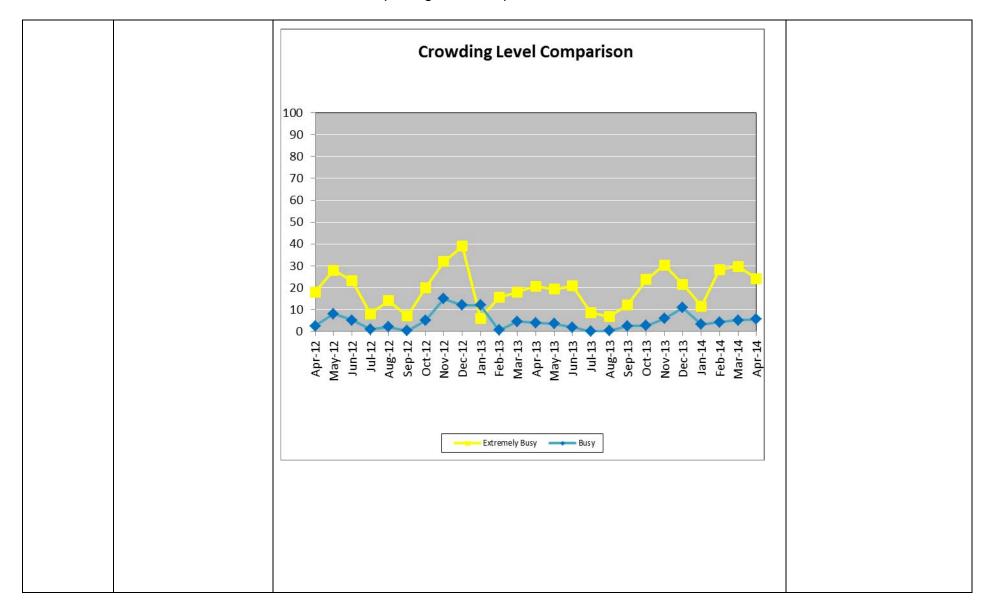
ReddiNet



# Key points:

- -- Diversion is for paramedic runs only; Basic Life Support ambulances still arrive.
- -- When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".





Operational Monitoring Report Reporting Period: April 2014

Metrics
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# 3. & 4. Rancho Los Amigos National Rehabilitation Center (RLANRC) Transfers

# Transfers:

The volume of patients transferred to RLANRC for acute hospitalization from the Emergency Department and from Inpatient Units.

# **Data Source:**

Manual record keeping.

Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.

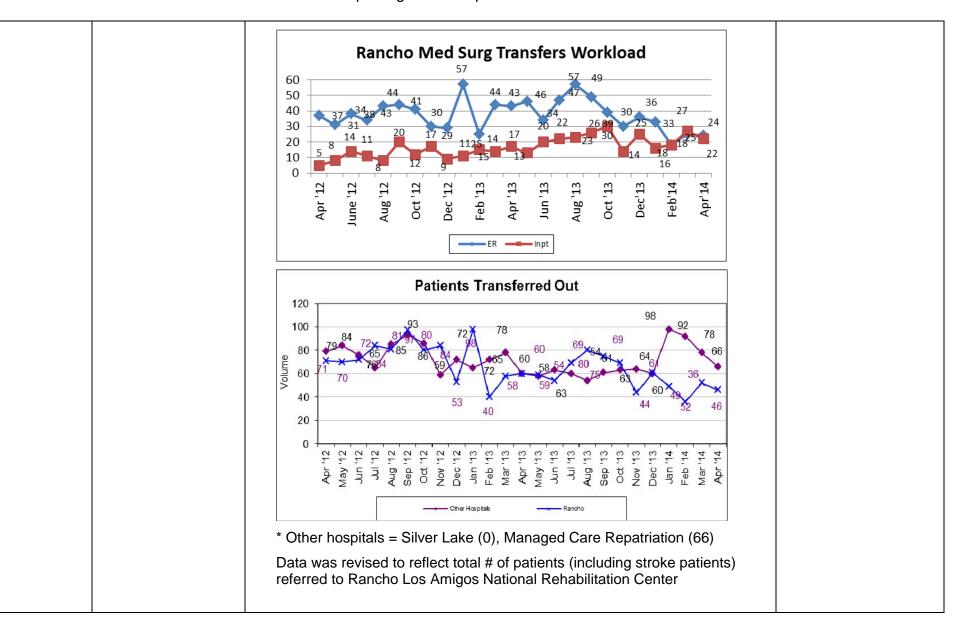
# Month of April '14

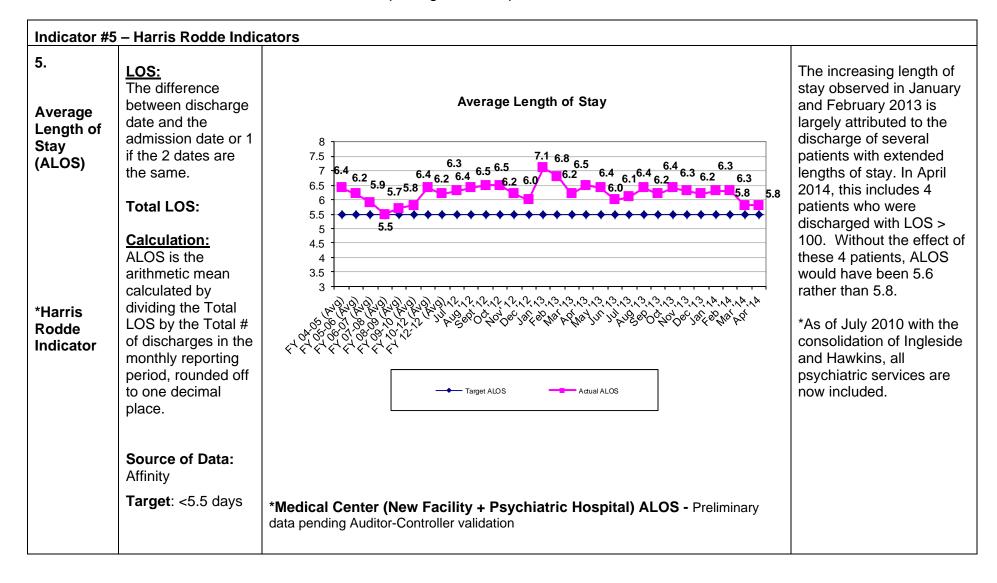
# **Referrals from ER:**

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	2	NA	-
# Referred to RLANRC	2	22	24
# Transfers	2	22	24
# Denied	0	NA	-
# Cancelled	0	NA	-
# Patients Refused of Those Cancelled	0	NA	-

**Referrals from Inpatients:** 

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	24	NA	-
# Referred to RLANRC	24	1	25
# Transfers	21	1	22
# Denied	1	NA	-
# Cancelled	2	NA	-
# Patients Refused of Those Cancelled	0	NA	-
Other /Pending	0	NA	-





6.	Census:	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent
Pediatric Bed	ensus and admitted pediatric		(10 = 111)	(=====,	(10 = 0.00)	(20 Beds)
Census and		Jan-11	55%	60%	70%	70%
ccupancy (%)		Feb-11	57%	68%	80%	80%
	designated pediatric	Mar-11	57%	60%	70%	75%
	ward.	Apr-11	55%	64%	50%	75%
Pediatric ICU		May-11	57%	56%	50%	80%
(PICU)	Occupancy: The total number of	Jun-11	70%	52%	60%	75%
Neonatal ICU	admitted pediatric	Jul-11	58%	44%	50%	70%
(NICU)	inpatients divided by	Aug-11	58%	44%	40%	75%
Pediatric Unit	the total number of	Sep-11	58%	40%	50%	75%
Adolescent	licensed beds on that	Oct-11	55%	52%	60%	70%
	unit and reported as a	Nov-11	62%	60%	70%	75%
Unit	percentage.	Dec-11	65%	40%	60%	70%
		Jan-12	60%	52%	60%	75%
	Source of Data:	Feb-12	55%	56%	60%	70%
	Affinity	Mar-12	55%	64%	50%	75%
	Annity	Apr-12	53%	48%	50%	65%
		May-12	42%	40%	50%	70%
		Jun-12	38%	44%	50%	60%
		Jul-12	45%	48%	60%	80%
		Aug-12	57%	48%	50%	75%
	Sep-12	63%	56%	50%	80%	
		Oct-12	58%	64%	60%	70%
		Nov-12	63%	44%	50%	45%
		Dec-12	73%	36%	60%	50%
		Jan-13	63%	48%	70%	70%
		Feb-13	50%	48%	70%	75%
		Mar-13	53%	44%	60%	75%

Way-13	53% 13%	40%		Beds)
	13%		50%	55%
Jun-13 4		44%	60%	45%
	18%	48%	50%	35%
Jul-13 4	18%	32%	50%	60%
Aug-13 4	15%	40%	40%	75%
Sep-13 4	18%	48%	40%	80%
Oct-13 5	53%	44%	40%	55%
Nov-13 4	13%	32%	50%	60%
Dec-13 4	10%	44%	40%	60%
Jan-14 4	15%	40%	50%	75%
Feb-14 5	53%	48%	40%	60%
Mar-14 4	13%	44%	50%	45%
Apr-14 3	38%	36%	40%	50%

7.	Census:	Date	Med Surg	Jail	ICUs	Burn*	OB/GYN
Med Surg / ICU	The total number		(309 beds)	(24 Beds)	(120	(20 Beds)	(Med
Bed Census and Occupancy	•				Beds)		Surg) (32 beds)
(%)		Nov-12	87%	83%	83.5 %	51%	87%
` '	•	Dec-12	88%	71%	83%	44%	83%
Occupancy:	Jan-13	95%	73%	85%	55%	98%	
Medical	The total number of	Feb-13	93%	59%	87%	61%	95%
Surgical Unit	admitted inpatients	Mar-13	91%	62%	82%	47%	93%
(Med Surg)	divided by the total	Apr-13	88%	82%	85%	57%	99%
	number of licensed	May-13	88%	66%	82%	57%	90%
1 11 11 14 71 115	beds on that unit and	Jun-13	82%	71%	80%	60%	81%
Jail Unit (Jail)	reported as a	Jul-13	88%	79%	82%	42%	88%
	percentage.	Aug-13	93%	79%	83%	44%	91%
ICUs (Excluding		Sep-13	95%	83%	83%	50%	100%
Burn ICUs)	Source of Data:	Oct-13	91%	72%	78%	59%	95%
Dui ii 1003)	Affinity	Nov-13	91%	66%	82%	67%	83%
	Allility	Dec-13	90%	73%	80%	60%	83%
OB/GYN Unit		Jan-14	92%	72%	86%	45%	93%
(Med Surg)		Feb-14	91%	79%	85%	53%	96%
, a		Mar-14	87%	75%	77%	49%	73%
		Apr-14	87%	85%	83%	65%	87%
		* Burn= Bo	oth ward (10)	and ICUs (10	)		